

# **KANSAS WIC**

## **CLIENT FEEDBACK SURVEY**

**This is a survey for the Kansas WIC Program. It will take about five minutes to complete. The survey is being done so that we can tell how well our services are meeting your needs.**

**Your opinion is very important to us. Your participation in this survey is appreciated, but not required. Your answers will be kept completely confidential, so please be honest. Thank you for your time.**

**Please circle only one response for each question or statement.  
If more than one response is true, circle the one that is most  
relevant or important to you.**

- 1. Is the nutrition information you learn at WIC useful for you and your family?**
- a. yes
  - b. no
  - c. sometimes

Comments:

- 2. Is the WIC staff helpful and friendly?**
- a. yes
  - b. no
  - c. sometimes

Comments:

- 3. Were all your WIC concerns and questions answered?**
- a. yes
  - b. no
  - c. sometimes

- 4. Which of the following describes the WIC Program's promotion of breastfeeding?**
- a. I was not on WIC during my pregnancy.
  - b. The WIC staff encouraged me to breastfeed when I was pregnant.
  - c. The WIC staff did not encourage me to breastfeed when I was pregnant.
  - d. The WIC staff pushed breastfeeding even when I let them know I was not going to breastfeed.

**5. I would like more information on:**

**(Circle all that apply)**

- a. planning meals with WIC foods
- b. how to save money at the grocery store
- c. foods that are good for me and my children
- d. breastfeeding (how to and why)
- e. nutritious snacks and drinks
- f. foods that help build strong blood
- g. what to feed picky eaters
- h. how to reduce fat and/or sugar
- i. foods for overweight children
- j. dental health
- k. physical activity for children
- l. other \_\_\_\_\_

\_\_\_\_\_

**6. Have you ever had to take less food than is printed on the check because the store did not have the full amount on the shelf?**

- a. Yes      b. No

If yes, which store? \_\_\_\_\_

**7. What do you like most about the WIC Program?**

**8. What do you like least about the WIC Program?**

**9. How can we improve the WIC Program?**

**THANKS AGAIN FOR YOUR TIME AND EFFORT. WE APPRECIATE YOUR SUPPORT.**

# FOOD CONCERNS

**Please circle only one response for each question or statement. If more than one response is true, circle the one that is most relevant or important to you.**

1. **The food that I bought just didn't last, and I didn't have enough money to get more.**
  - a. Not true
  - b. Sometimes true
  - c. Often true
2. **I ran out of foods that I needed to put together a meal and I didn't have money to get more food.**
  - a. Not true
  - b. Sometimes true
  - c. Often true
3. **We eat the same thing for several days in a row because we only have a few different kinds of foods on hand and do not have money to buy more.**
  - a. Not true
  - b. Sometimes true
  - c. Often true
4. **I can't give my children a balanced meal because I can't afford the food.**
  - a. Not true
  - b. Sometimes true
  - c. Often true
5. **My children are not eating enough because I just can't afford enough food.**
  - a. Not true
  - b. Sometimes true
  - c. Often true
6. **I know my children are hungry sometimes, but I just can't afford more food.**
  - a. Not true
  - b. Sometimes true
  - c. Often true